

Program Title **Michigan Dental Program (MDP)**
Administered By: **Michigan Department of Health & Human Services (MDHHS)**

Eligibility Requirements: **PROGRAM IS SPECIFIC TO PEOPLE WITH HIV/AIDS
RESIDING IN THE STATE OF MICHIGAN**

Most current forms: Website: **www.Michigan.gov/OralHealth**
Click the link titled: Michigan Dental Program for Those Living with HIV/AIDS
Forms and Instructions are toward the bottom of the page.

How to apply:

- Complete all questions on MDP application and have client sign page 2
- Provide current labs within 6 months of application showing CD4 count and viral loads (either detected or undetected).
- Provide proof of income (if any). Applicant's gross income cannot exceed 450% of the Federal Poverty Level. Pay stubs for 4 week period, SS award letters or bank statement showing direct deposits
- Provide proof of residency in state of Michigan. State ID or drivers' license or utility bills are examples.
- Provide proof client applied for Medicaid. Confirmation of applicant applying for benefits or printout of Medicaid benefits awarded.
- A client MAY have private medical insurance but CAN NOT have private dental insurance and be eligible for MDP benefits.
- Mail or fax completed application with documentation to the address listed below clients' signature on page 2 of application.

Michigan Dental Program
109 W. Michigan Ave, 8th Floor
Lansing, MI 48913
Fax # 517-335-8697

Application processing time is 14 business days from receipt of application.

A welcome or renewal letter will be sent to clients to use as proof of coverage.

Clients must see a dentist that participates in the MDP program. Call the MDP office to find a participating dentist in the client's area.

Duration of coverage: A renewal application is required once a year for each client. A 6 month verification application will also be sent to client within this year. Coverage termination dates will be 6 months.

Contact MDP: **1-844-648-3384**